


United States Bankruptcy Court  
61288, Houston TX 77208SOUTHERN DISTRICT OF TEXAS P.O.Box  
(Houston Division)

PROOF OF CLAIM

Name of Debtors  <input checked="" type="checkbox"/> Stage Stores, Inc., a Delaware corporation <input type="checkbox"/> Specialty Retailers, Inc., a Texas corporation <input type="checkbox"/> Specialty Retailers, Inc. (NV), a Nevada corporation  *place an "x" beside the name of the Debtor you are filing a claim against		Case Number  00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	Creditor ID#: 788-36276
Name of Creditor (The person or other entity to whom the debtor owes money or property):  Lake Charles American Press		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Name and address where notices should be sent:  *****AUTO**ALL FOR AADC 700 Lake Charles American Press P.O. Box 54355 New Orleans LA 70154-4355  		<input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case  <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	
Account or other number by which creditor identifies debtor: 06103902000		Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____	

**1. Basis for Claim**

- ☒ Goods sold  
☐ Services performed  
☐ Money loaned  
☐ Personal injury/wrongful death  
☐ Taxes  
☐ Other \_\_\_\_\_

☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)  
☐ Wages, salaries, and compensation (Fill out below)  
 Your SS#: \_\_\_\_\_  
 Unpaid compensation for services performed  
 from \_\_\_\_\_ (date) to \_\_\_\_\_ (date)

**2. Date debt was incurred:****3. If court judgment, date obtained:****4. Total Amount of Claim at Time Case Filed: \$ 23,655.26**

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.
**5. Secured Claim.**
☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- ☐ Real Estate ☐ Motor Vehicle  
☐ Other All personal and intangible property of Debtor's Estate

Value of Collateral: \$ \_\_\_\_\_

Amount of arrearage and other charges at time case filed included in secured claim, if any \$ \_\_\_\_\_

**6. Unsecured Priority Claim.**
☐ Check this box if you have an unsecured priority claim

Amount entitled to priority \$ 23,655.26

Specify the priority of the claim:

- ☐ Wages, salaries, or commissions (up to \$4,300)\* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3)  
☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).  
☐ Up to \$1,950\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).  
☐ Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).  
☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).  
☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a-\_\_\_\_).

\*Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

**7. Credits:** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.**8. Supporting Documents:** Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.**9. Date-Stamped Copy:** To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.Date  
07/13/00

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

Thomas B. Shearman, III Publisher

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Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

07/12/00

STAGE STORES, INC.

23655.26

Net: 15

2455.20

9291.32

11908.74

0.00

1 07/12/00

STAGE STORES, INC.  
10201 MAIN  
HOUSTON, TX 77025Lake Charles American Press  
P.O. Box 54355  
New Orleans LA 70154-4355

06103902000

06103902000

QUESTIONS? CALL 494-4032

200

04/05	19503235001	4 pg std One Day Sale	380.0000	1	2455.20	2455.20
		04/05				
05/17	19503438001	4 pg std One Day Sale	380.0000	1	2455.20	2455.20
		05/17				
06/07	19503564001	4 pg std One Day Sale	389.0000	1	2455.20	2455.20
		06/07				
04/07	10565144001	PO # SGS02554 4/7 510 6x11 extra 75% off	66.0000	1	872.41	872.41
		04/07				
04/09	10565572001	PO # SGS02563 4/9 738 6x11 izod	66.0000	1	952.93	952.93
		04/09				
04/12	10565785001	PO # SGS02578 4/12 315 3x10 baby sale	30.0000	1	396.55	396.55
		04/12				
04/14	10565891001	PO # 34954 4/14 515 6x21.5 spring sale	129.0000	1	1705.17	1705.17
		04/14				
04/19	10566383001	PO # 34954 4/19 307 5x17 pre-easter sale	85.0000	1	1123.56	1123.56
		04/19				
04/21	10566497001	PO # 34954 4/21 505 6x11 pre-easter sale	66.0000	1	872.41	872.41
		04/21				
04/23	09165197001	PO # 34954 4/23 705 6x11 after easter	66.0000	1	952.93	952.93
		04/23				
04/26	09165654001	PO # 34954 4/26 306 6x21.5 ecm sale	129.0000	1	1705.17	1705.17
		04/26				
04/28	10566995001	PO # 34954 4/28 502 6x11 ecm sale	66.0000	1	872.41	872.41
		04/28				
05/03	10567569001	PO # 35003 5/3 303 6x11 pos sale	66.0000	1	872.41	872.41
		05/03				

Thank you for your business.

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New Orleans LA 70154-4355

06103902000

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QUESTIONS? CALL 494-4032

05/05	09166428001	PO # 35003 5/5 506 6x11 best brands	66.0000	1	872.41	872.41
		05/05				
05/12	10568231001	PO # 35003 5/12 503 6x21.5 moms day	129.0000	1	1705.17	1705.17
		05/12				
05/25	09168126001	PO # 36312 5/25 403 6x21.5 memorial day	129.0000	1	1705.17	1705.17
		05/25				
05/26	09168242001	PO # 36312 5/26 502 6x11 memorial day	66.0000	1	872.41	872.41
		05/26				
05/28	09168420001	PO # 36442 5/28 703 4x14 memorial day	56.0000	1	808.55	808.55
		05/28				

Thank you for your business.

2455.20

9291.32

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07/12/00

06103902000

(713) 669-2841

STAGE STORES, INC.